

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

B 838 SS

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHE SMAL	R THAN L ENTITY
TOTAL CLAIMS						•		RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE .	OF	BASIC FE	E 920
Ţ	OTAL CHARGE	ABLE CLAIMS	minus 20=		*			XS 9=	:	ÖF	X\$16=	
IN	DEPENDENT (	CLAIMS	12	mınus 3 =	*			X43=		OR	X86=	
М	ULTIPLE DEPE	NDENT CLAIM	PRESENT					+145=	·	OR	-290=	240
* If the difference in column 1 is less than zero, enter "0" in column						column 2	I	TOTAL		OR	TOTAL	10/10
CLAIMS AS AMENDED - PART II									L			THAN
		(Column 1)		(Colum		(Column 3)		SMALI	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONA FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= /		XS 9=		OR	X\$18=	
ME	Independent	*	Minus	***	<del></del>	= -		X43=		OR	X86=	
	FIRST PRESE	ENTATION OF M	ULTIPLE DE	EPENDENT	CLAIM	,		+145=		OR	+290=	
· .								TOTAL		OR	TOTAL ADDIT. FEE	
		(Caluma 1)		 (Colum	n 2)	(Column 3)	. Al	ODIT. FEE	·		ADDII. FEE	
		(Column 1)	<del></del>	HIGHE		1			ADDI-	ו ר	<del></del>	ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBI PREVIOU PAID F	ER JSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	<b>4</b> € 3		= '		X\$ 9=		OR	X\$18=	
	Inaependent	•	Minus			=	Γ	X43=		OR:	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR.	+290=	
								TOTAL DIT. FEE		OR A	TOTAL ODIT. FEE	
(Column 1) (Column 2) (Column 3)									~			
AMENOMENIC		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	ST R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	,	<b>(\$ 9</b> =		OR	X\$18=	
ב על	Independent	*	Minus			=		<43=		OR	X86=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR	+290=	
•• If										OR A	TOTAL ODIT. FEE	
	the "Highest Nurs	nber Previously Pa per Previously Paid	d For IN THE	S SPACE is le	ess than	3. enter "3."		IT. FEE L in the app	ropriate box	in colui	mn 1.	
				·							THENT OF	